

BUILDING PERMIT APPLICATION

PERMIT # _____

ADDRESS OF WORK LOCATION: _____

TYPE OF PERMIT (Check one only)

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> BUILDING (List size/sq ft) | <input type="checkbox"/> ELECTRICAL | <input type="checkbox"/> PLUMBING | <input type="checkbox"/> HVAC |
| <input type="checkbox"/> Foundation _____ | <input type="checkbox"/> Service Change | <input type="checkbox"/> New Residential | <input type="checkbox"/> New Residential |
| <input type="checkbox"/> Addition _____ | <input type="checkbox"/> CRS# _____ | <input type="checkbox"/> New Commercial | <input type="checkbox"/> New Commercial |
| <input type="checkbox"/> Acc Structure _____ | <input type="checkbox"/> New Residential | <input type="checkbox"/> Addition | <input type="checkbox"/> Addition |
| <input type="checkbox"/> Deck _____ | <input type="checkbox"/> New Commercial | <input type="checkbox"/> Fire Suppression | <input type="checkbox"/> Central Air |
| <input type="checkbox"/> Roofing (# Squares) _____ | <input type="checkbox"/> Addition | <input type="checkbox"/> Water Heater | <input type="checkbox"/> Replace/Repair |
| <input type="checkbox"/> Siding (# Squares) _____ | <input type="checkbox"/> Pool Wiring | <input type="checkbox"/> Fuel Tank | <input type="checkbox"/> Boiler/Furnace |
| <input type="checkbox"/> Pool A/G _____ I/G _____ | <input type="checkbox"/> Low Voltage | <input type="checkbox"/> Other | <input type="checkbox"/> Other |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Other | | |

**For the issuance of a building permit – a Zoning Permit may be required.*

☐ Public Water ☐ Sewer ☐ Well ☐ Septic

DESCRIPTION OF WORK (must complete for all permits) _____

Fair Mkt Value (Labor+Material) \$ _____ Fees \$ _____ (B) \$ _____ (Z) \$ _____ (CO) \$ _____ (DF)

Owner: _____ Applicant: _____

Address: _____ Address: _____

_____ Zip: _____ _____ Zip: _____

Phone # (Days): _____ Phone # (Days): _____

License# _____ Type: _____ Exp: _____

I understand that applying for this permit does not guarantee that it will be issued, and no work shall be done prior to the issuance of said permit or the approval of the **Building Official**. I agree to be in compliance with all applicable codes, standards, statues, and ordinances which may pertain. If other than the owner, applicant hereby certifies that they are authorized by the owner to make this application per C.G.S. 20-338b.

Applicant Signature: _____ **Print Name:** _____ **Date:** _____

Staff Member Check pertinent items and initial:

Planning _____ Wetlands _____ Health/WPCA _____ Fire Marshal _____

Worker's Comp _____ License verified _____ Zoning _____

Special Conditions or Comments: Per CT State Building Requirements, Inspections indicated on reverse must be called for—**Min 48 hrs. Notice Required** _____

Reviewed & Issued by: _____ Date: _____

APPLICANT – EACH BLOCK BELOW WITH AN X IN IT INDICATES A REQUIRED INSPECTION. YOU MUST CALL 860-870-3633 (BUILDING DEPT.) TO REQUEST EACH INSPECTION WHEN READY AS INDICATED. ALLOW A MINIMUM OF 48 HOURS NOTICE. THE WORK SHALL NOT PROCEED TO THE NEXT STAGE UNTIL THE INSPECTION PASSES AND THE BUILDING INSPECTOR INITIALS BELOW.

<input type="checkbox"/> PRELIMINARY INSPECTION BEFORE WORK BEGINS	<input type="checkbox"/> INSULATION INSPECTION BEFORE COVERING	<input type="checkbox"/> PRESSURE TEST - GAS
<input type="checkbox"/> FOOTING OR PIERS PRIOR TO POURING	<input type="checkbox"/> FINAL INSPECTION	<input type="checkbox"/> PRESSURE TEST (CIRCLE) WATER UNDERGROUND DRAIN-WASTE-VENT
<input type="checkbox"/> FOUNDATION PRIOR TO POURING	<input type="checkbox"/> C.O. INSPECTION BEFORE OCCUPANCY	<input type="checkbox"/> ABOVE CEILING
<input type="checkbox"/> WATER PROOFING AND FOOTING DRAINS	<input type="checkbox"/> SWIMMING POOL BONDING BEFORE COVERING REBARS & FOUNDATION	<input type="checkbox"/> ELECTRICAL SERVICE <input type="checkbox"/> UNDERGROUND
<input type="checkbox"/> FRAMING INSPECTION WHEN SHELL IS ERECTED INCLUDING ROUGH MECHANICALS & ELECTRICAL	<input type="checkbox"/> SWIMMING POOL FENCE BEFORE FILLING POOL	<input type="checkbox"/> ROOFING UNDER LAYMENT
<input type="checkbox"/> CHIMNEY/FIRE BOX	<input type="checkbox"/> FIRE MARSHAL APPROVAL	<input type="checkbox"/> OTHER

Mail Permit To:
